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29157 7590 05/20/2004

BELL, BOYD & LLOYD LLC
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Renee Street	(Depositor's name)
	(Signature)
August 19, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/622,629	10/20/2000	David A. Mark	112701-006	8726

TITLE OF INVENTION: CALORICALLY DENSE NUTRITIONAL COMPOSITION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	08/20/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
SHARAREH, SHAHNAME J	1617	514-002000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev. 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Bell, Boyd & Lloyd LLC

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Nestec S.A.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Vevey, Switzerland

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☒ Advance Order - # of Copies 3

4b. Payment of Fee(s):

☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-1818 (enclose an extra copy of this form).

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(Authorized Signature) (Date) August 19, 2004

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08/24/2004 DENMANU2 00000024 09622629

01 FC:1501

1330.00 OP

02 FC:8001

9.00 OP

TRANSMIT THIS FORM WITH FEE(S)

TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity) (37 C.F.R. 1.311)				Docket No. 112701-006	
Applicant(s): Mark et al.					
Serial No. 09/622,629	Filing Date October 20, 2000	Examiner S. Sharareh	Group Art Unit 1617	Confirmation No. 8726	
Invention: CALORICALLY DENSE NUTRITIONAL COMPOSITION					
Mail Stop Issue Fee TO THE COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450					
Transmitted herewith are the following for the above-identified application.					
<input checked="" type="checkbox"/> Issue Fee Transmittal Form PTOL-85					
<input checked="" type="checkbox"/> Utility Fee: \$ 1330.00 <input type="checkbox"/> Design Fee: _____ <input type="checkbox"/> Plant Fee: _____					
<input type="checkbox"/> Publication Fee: _____					
<input checked="" type="checkbox"/> A check in the amount of \$1,339.00 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 02-1818 as described below.					
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<input checked="" type="checkbox"/> Charge any additional fee required.					
_____ <i>Signature</i>			Dated: August 19, 2004		
Robert M. Barrett (Reg. No.: 30,142) ATTORNEYS FOR APPLICANTS Bell, Boyd & Lloyd LLC P.O. Box 1135 Chicago, Illinois 60690-1135					
CC:					
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p style="text-align: center;">Certificate of Transmission by Facsimile</p> <p style="text-align: center;">This certificate may only be used if paying by deposit account.</p> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> I certify that this document and authorization to charge deposit account is being facsimile transmitted to the United States Patent and Trademark Office (Fax No.) _____ Date </div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> _____ Signature </div> <div style="border: 1px solid black; padding: 5px;"> _____ Typed or Printed Name of Person Signing Certificate </div> </div> <div style="width: 45%;"> <p style="text-align: center;">Certificate of Mailing by First Class Mail</p> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> I certify that this document and fee is being deposited on 8/19/2004 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. </div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> _____ Signature of Person Mailing Correspondence </div> <div style="border: 1px solid black; padding: 5px;"> Renee Street _____ Typed or Printed Name of Person Mailing Correspondence </div> </div> </div>					